				Under the Paperwork Reduction Act of 1995, no	persons are rec	uired to respond to	a collection of information	n unless it dis	plays a valid OMB control numb	
REQUEST						Applicatio	Application Number		10/552,665	
FOR (DOE)						Filing Date	e	October	11, 2005	
С	ON	ITI		ED EXAMINATION (RO	ed Inventor	Martin G	i. Reese			
TRANSMITTAL Address to:						Art Unit		1631		
Mail Stop RCE Commissioner for Patents						Examiner	Name	Carolyn	L. Smith	
P.O. Box 1450 Alexandria, VA 22313-1450							Docket Number	OM1100	1-2	
Re	quest	for C	ontinue	or Continued Examination (RCE) under Examination (RCE) practice under 37 CFR 1.  ny design application. See Instruction Sheet for	114 does no	t apply to any	utility or plant appli	cation filed		
1.	Submission required under 37 CFR 1.114									
	a.	$\boxtimes$	☑ Previously submitted							
		j.	Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on: <u>January 21, 2010</u> (Any unentered amendment(s) referred to above will be entered).							
		ii.		Consider the arguments in the Appe	al Brief or	Reply Brief	f previously filed	d on		
		iii.		Other		_				
	b.		Enclosed							
	D.	i.			:::	☐ Information Disclosure Statement (IDS)				
				Amendment ( pgs.)			ilion Disclosure	Stateme	ant (IDS)	
2.	Mie	ii. scel	□ laneo	1.175 Declaration ( )	IV.	☐ Other:				
	Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)									
	b.		Other							
3.	Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.     a. ☑ The Director is hereby authorized to charge the total amount of § 405.00 to Deposit Account No. 07. The director is further authorized to charge any additional fees, or credit any overpayments, to Dep Account No. 07.1896, referencing the above-identified Attorney Docket Number.     i. ☑ RCE fee required under 37 CFR 1.17(e) (\$405.00)									
		ii.		Extension of time fee (37 CFR 1.136	and 1.17	)				
		iii.	□ 0	ther						
	b.		]	Check number in the total a	mount of	is	s enclosed			
<ul> <li>Payment by credit card (Form PTO-2038 enclosed)</li> <li>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</li> </ul>										
				SIGNATURE OF APPLICANT,	ATTORNE	<del></del>				
Name (Print/Type) Lisa A. Halle, J.D., Physical Registration No. (Attorney/Agent) 38,347										

Burden Hour Statement: This form is definated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the O'her Information Officer, U.S. Palent and Trans Alexandria, VA 22313-1450.

Date

February 4, 2010

Signature